DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 30004693 -2

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As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

a patent is sought on t Voice Communication	Concern	ing A Local Entity									
the specification of w	hich is at	tached hereto un	es the following box is	checked:							
the specification of which is attached hereto unless the following box is checked: () was filed on as US Application No. or PCT International Application											
Number			s amended on (if applicable).								
			tood the contents of th								
including the claims, of disclose all information Foreign Application(s) and/of thereby claim foreign priori inventor(s) certificate listed	as amend n which is or Claim of ity benefits below and	ded by any ameno s material to pate Foreign Priority ander Title 35, Unite have also identified b	Ament(s) referred to about ability as defined in 37 defined in 119 of the States Code Section 119 of the states are foreign application for the states are foreign as the states are foreign as foreign fo	ve. I acknowled CFR 1.56. any foreign applicat	dge the duty						
a filing date before that of t	he applicat										
COUNTRY		APPLICATION NUMBER		PRIORITY CLAIMED	UNDER 35 U.S.C. 11:						
GB		0028810.0	Nov 25, 2009	AES: X	NO:						
				ABS:	NO:						
Provisional Application I hereby claim the benefit u below:	ınder Title	35, United States Cod	de Section 119(e) of any Unite	ed States provisional	application(s) lis						
	Γ	APPLICATION NUMBER	FILING DATE								
insofar as the subject matte manner provided by the firs information as defined in Tit	er of each of t paragraph tie 37, Cod	of the claims of this a h of Title 35, United (e of Federal Regulation	de, Section 120 of any United pplication is not disclosed in the States Code Section 112, I aclus, Section 1.56(a) which occurs,	he prior United State knowledge the duty	es application in to disclose mate						
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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

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		an.
	ntor: Paul St John Brittan	Citizenship: GB
	Oldfield Cottage 39 High St	reet CLAVERHAM Somerset BS49 4NE
esidence:	Somerset BS49 4NE Englan	d
ost Office Address:		
ventor's Signature		Date
Melifot a adimina		
	A Balance	Citizenship: GB
Full Name of # 3 joint inve	entor: Marianne Hickey 40 Maple Road Bristol BS7	8RQ GB
Residence:	· · · · · · · · · · · · · · · · · · ·	
Post Office Address:	Same as Residence	
		Date
inventor's Signature		
		Citizenship: GB
Full Name of # 4 joint inv	ventor: Law rence Wilcock	AND THE SAILS OTH Fooland England
Residence:	14 Old Railway Close Mai	mesbury Wiltshire SN16 9TU England England
	Same as Residence	
Post Office Address:		
inventor's Signature		Date
n er # 1.2n4 In	nventor: Guillaume Belrose	Citizenship: FR
Full Name of # 6 joint u	4 Montague Court Monta	ague Hill South Bristol BS2 8HS England
Residence:	Same as Residence	
Post Office Address:	Same as Nesidente	
		Date
Inventor's Signature		
		Citizenship: GB
Full Name of # 6 joint	inventor: Andrew Thomas	Atherton California 94027-1931 USA
Residence:	57 San Benito Avenue A	Atherron Camorina 5 to 2
Post Office Address:	Same as Residence	
LOSE OTHER VISION		Date
inventor's Signature		Nare
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Full Name of # 7 join	t inventor:	Citizenship:
Residence:		
Post Office Address:		
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		Citizenship:
Full Name of # 8 joi	int inventor:	
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